

How Can We Help You?

What is this?

This survey was created to help better understand both your specific needs as well as the needs of our community. It is a short, 10 question survey that is voluntary.



What happens with my answers?

Your answers will help us in providing services and referrals as well as identify areas for improvement

1. Please choose only one statement that best describes your Access to Services:

- I don't know where to go if I need help.
- I know where to go for help, but I can't get there (due to childcare, transportation, etc...)
- I know where to go for help, but I sometimes have trouble getting there.
- I am getting help but still have needs that are not met.
- I do not need any help right now or I am getting all of the help I need.

2. Please choose only one statement that best describes your Food needs:

- I don't have enough food.
- I am receiving food stamps.
- I sometimes use food stamps and food banks but I also buy food.
- I can afford to buy food without using food stamps or food banks.
- I can afford to buy any kind of food that I want.

3. Please choose only one statement that best describes your Housing situation:

- I am homeless or I have received a foreclosure or eviction notice.
- I am living in an unsafe or unaffordable house or apartment but only until I can find something better.
- I have a government voucher or I can afford to rent my house or apartment on my own, but would like to move into a better place.
- I own my house or can afford to rent my house or apartment on my own, but I would like a better place.
- My house is safe, secure, affordable and where I want to be.

4. Please choose only one statement that best describes your Income:

- I have no income and am struggling to meet basic needs.
- I have some income, but not enough to meet my basic needs (childcare, housing, transportation, food, etc)
- I make enough money to meet my basic needs, but that is all.
- I can pay my bills each month, but there is nothing left over for savings or buying anything extra.
- I can pay my bills, put money into savings, and afford to buy non-essential items.

5. Please choose only one statement that best describes your Safety needs:

- I am not safe in my home, community, or relationship.
- I feel unsafe most of the time in my home or community and/or I am not in a safe relationship.
- I feel unsafe some of the time but am not in an abusive relationship.
- I feel safe almost all of the time.
- I feel safe in my home, community, and relationship all of the time.

Thank you for your time and participation!

Name of Program and Division Here

Staff Note:

6. Please choose only one statement that best describes your Transportation needs:

- I do not have a car and cannot afford to ride the bus right now.
- I have a car, but it always breaks down and I cannot afford to ride the bus.
- I have a car but it doesn't always work, or I can ride the bus but it doesn't often go where or when I need it.
- I am almost always able to get where I need to go by bike, car, or bus.
- I have a reliable car and am always able to get any place I need to go.

7. Please choose only one statement that best describes your Employment situation:

- I do not have a job right now.
- I have a seasonal or temporary job but the pay is not enough and I do not have benefits.
- I have a full time job but my wage is not enough to live on and I have no benefits.
- I have a full time job with some benefits.
- I have a permanent, full time job that pays enough to live on and I have good benefits.
- N/A (I am retired or am unable to work due to a disability)

8. Please choose only one statement that best describes your Health Care access:

- Someone in my family or I am sick and needs health care and we don't have any insurance.
- My family does not have health insurance, but no one is sick right now.
- Some members of my family have health insurance (Medicaid, CHP+, or private insurance).
- All members of my family have access to health care but we are struggling to afford the payments.
- All members of my family have access to health care and dental care when needed.

9. Please choose only one statement that best describes your Adult Education:

- I do not have a high school diploma or a GED or I struggle to read and write on my own.
- I am enrolled in GED or literacy program.
- I have a high school diploma or have completed my GED.
- I have a high school diploma or GED and I am enrolled in a college or training course.
- I am pursuing or I have a professional certification or college degree.
- N/A (this question does not apply to me)

10. Please choose only one statement that best describes your Children's Education:

- Not all of my children are enrolled in school.
- All my children are in enrolled in school but are not attending.
- All of my children are enrolled in school but they only go once in a while.
- All of my children are enrolled in school and they go most of the time.
- All of my children are enrolled in school and are attending on a regular basis.
- N/A (I do not have any school aged children)

Consent to Release of Information:

I understand that this survey may be shared with other divisions and departments within Boulder County Government, including, but not limited to: Housing & Human Services, Aging Services, Head Start, Community Action Programs, Community Justice Services, Workforce and Child Health Care Plus. I also understand that I do not have to complete this survey and that this will not affect the services I am receiving or eligible to receive.

Your Signature _____ Printed Name _____

Today's Date: _____

Thank you for your time and participation!